## Supplemental Application Data Sheet

Application Information	ıor
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Application number::

10/544093

Filing Date::

August 1, 200508/01/05

Application Type::

Regular

Subject Matter::

Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R??::
Number of CD disks::

Number of copies of CDs::

Sequence Submission::

Computer Readable Form (CRF)?::

Number of copies of CRF::

Title::

Active Immunization to Generate Antibodies to

Soluble A-Beta

Attorney Docket Number::

15270JC-009820US

Request for Early Publication::

Request for Non-Publication::

Suggested Drawing Figure::

Total Drawing Sheets:: Small Entity?::

No

Nο

Nο

Latin name::

Variety denomination name::

Petition included?::

No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers One::

Secrecy Order in Parent Appl.::

No

## Applicant Information

Country of Residence::

Country of mailing address::

Country of Residence::

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US

Status:: Full Capacity

Given Name... Ted

Middle Name::

Family Name:: Yednock

Name Suffix::

City of Residence:: Forest Knolls

State or Province of Residence:: CA

Street of Mailing Address:: 184 Arrovo Road

US

US

US

City of Mailing Address:: Forest Knolls

State or Province of mailing address:: CA

Postal or Zip Code of mailing address:: 94933

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Primary Citizenship Country:: US
Status:: Full Capacity

Status:: Full Capacity

Given Name:: Nicki
Middle Name::

Family Name:: Vasquez

Name Suffix:: vasquez

City of Residence:: San Francisco

State or Province of Residence:: CA

Street of Mailing Address:: 310 Sanchez Street

City of Mailing Address:: San Francisco

State or Province of mailing address:: CA
Country of mailing address:: US

Postal or Zip Code of mailing address:: 94114

Applicant Authority Type:: Inventor

Primary Citizenship Country:: FR

Status:: Full Capacity

Given Name:: Frederique

Middle Name.

Family Name:: Bard

Name Suffix::

City of Residence:: Pacifica

State or Province of Residence:: CA

Country of Residence:: US

Street of Mailing Address:: 1111 Park Pacifica Avenue

City of Mailing Address:: Pacifica

State or Province of mailing address:: CA
Country of mailing address:: US

Postal or Zip Code of mailing address:: 94044

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Peter
Middle Name:: A

Family Name:: Seubert

Name Suffix::

City of Residence:: South San Francisco

State or Province of Residence:: CA
Country of Residence:: US

Street of Mailing Address:: 222 Northwood Drive
City of Mailing Address:: South San Francisco

City of Mailing Address.. South San Francisco

State or Province of mailing address:: CA

Country of mailing address:: US

Postal or Zip Code of mailing address:: 94080

Correspondence Information

Correspondence Customer Number:: 20350

Representative Information

Representative Customer Number:: 20350

**Domestic Priority Information** 

Application:: Continuity Type:: Parent Application:: Parent Filing Date::

This Application National Stage of PCT/US2004/02865 01/31/2004

PCT/US2004/02865 Application claiming 60/444,150 02/01200302/01/2003

benefit under 35 USC 119(e)

Foreign Priority Information

Country:: Application number:: Filing Date::

Assignee Information

Assignee Name:: <u>Janssen Alzheimer Immunotherapy</u>

Street of mailing address:: <u>Little Island Industrial Estate</u>

City of mailing address:: <u>Little Island</u>

State or Province of mailing address:: County Cork
Country of mailing address:: IE

Postal or Zip Code of mailing address::

Assignee Name:: Wyeth

Street of mailing address:: Five Giralda Farms

City of mailing address:: <u>Madison</u>
State or Province of mailing address:: <u>New Jersey</u>

Postal or Zip Code of mailing address:: 07940

Submitted by:

US

Country of mailing address::